

# 2016 Winter Swim Lessons

Our goal is to teach safe practices and swimming skills while still having fun.



**Ages: 6 months-Adult**

**Cost: \$35/\$40 (Resident/Non-Resident)**

**Each Session includes 8 lessons, 30 min each**

## Tuesday & Thursday Evenings

Session Dates

**1 Jan. 5-28 (Nov. 20, 5am - Deadline Jan. 2)**

**2 Feb. 2-25 (Jan. 22, 5am - Deadline Jan. 30)**

4:00-4:30	4:35-5:05	5:10-5:40	5:45-6:15	6:20-6:50
All Levels	All Levels	All Levels	All Levels	All Levels
		Guppies		Guppies
			Adult Beginning 5:45-6:20	Adult Intermediate 6:25-7:00

## Saturday Mornings

Session Dates

**A Jan. 9 - Feb. 27 (Nov. 9, 5am - Deadline Jan 6)**

9:00-9:30	9:35-10:05	10:10-10:40	10:45-11:15	11:20-11:50
All Levels	All Levels	All Levels	All Levels	All Levels
	Guppies		Guppies	
Adult Beginning		Adult Beginning		Adult Intermediate

**Please note: NO make-up lessons for missed classes.**

**Registrations will NOT be accepted after the deadline. Refunds will NOT be given after 1st day of class.**

**Register online at [www.activityreg.com](http://www.activityreg.com)**

Participant's Name \_\_\_\_\_

Age \_\_\_\_\_ Male or Female Birthdate \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Cell/Home Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Work Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relation \_\_\_\_\_ Phone Number \_\_\_\_\_

Has participant taken Swim Lessons before? No \_\_\_\_\_ Yes \_\_\_\_\_ Last Level Completed \_\_\_\_\_

Level: \_\_\_\_\_ Preferred Instructor: \_\_\_\_\_

I have received and signed the Murray City concussion Policy: Yes \_\_\_\_\_ No \_\_\_\_\_

Does the participant have any limitations? No/Yes If yes, please explain: \_\_\_\_\_

### LIABILITY RELEASE AND PERMISSION TO PARTICIPATE

In consideration of the acceptance of my application for the above activity, I hereby waive, release, and discharge any and all claims for damages, for death, personal injury, or property damage which I, as the participant, (or my child) may have, or which may hereafter accrue as a result of participation in said event. It is understood that some recreational activities involve an element of risk or danger of accidents, and knowing those risks, I hereby assume those risks. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I have read and understood the foregoing registration, and agree to all of their terms and conditions.

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_



202 E Murray Park Ave  
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(801) 284-4200



**PARK-CENTER**

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